

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

19045-49-25

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

| | | |
|----------------------------------------------------------------------|--------------------|--------------|
| TOTAL CLAIMS | 160 118 | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | 160 minus 20 = | * 140 |
| INDEPENDENT CLAIMS | 9 minus 3 = | * 6 |
| MULTIPLE DEPENDENT CLAIM PRESENT <input checked="" type="checkbox"/> | | |

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| | | | | | |
|-------------|-------------------------------------------------------------------------|-------------------------------------------|-------|---------------------------------------------|------------------|
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| | Total | * | Minus | ** | = |
| | Independent | * | Minus | *** | = |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | | |

BEST AVAILABLE COPY

(Column 1) (Column 2) (Column 3)

| | | | | | |
|-------------|-------------------------------------------------------------------------|-------------------------------------------|-------|---------------------------------------------|------------------|
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| | Total | * | Minus | ** | = |
| | Independent | * | Minus | *** | = |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | | |

(Column 1) (Column 2) (Column 3)

| | | | | | |
|-------------|-------------------------------------------------------------------------|-------------------------------------------|-------|---------------------------------------------|------------------|
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| | Total | * | Minus | ** | = |
| | Independent | * | Minus | *** | = |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | | |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY
TYPE ☐

OR OTHER THAN
SMALL ENTITY

| | |
|-----------|--------|
| RATE | FEE |
| BASIC FEE | 355.00 |
| X\$ 9= | |
| X40= | |
| +135= | |
| TOTAL | |

| | |
|-----------|--------|
| RATE | FEE |
| BASIC FEE | 710.00 |
| X\$18= | 2,520 |
| X80= | 480 |
| +270= | 270 |
| TOTAL | 3,980 |

SMALL ENTITY

OR OTHER THAN
SMALL ENTITY

| | |
|---------------------|------------------------|
| RATE | ADDI- TIONAL FEE |
| X\$ 9= | |
| X40= | |
| +135= | |
| TOTAL ADDIT. FEE | |

| | |
|---------------------|------------------------|
| RATE | ADDI- TIONAL FEE |
| X\$18= | |
| X80= | |
| +270= | |
| TOTAL ADDIT. FEE | |

| | |
|---------------------|------------------------|
| RATE | ADDI- TIONAL FEE |
| X\$ 9= | |
| X40= | |
| +135= | |
| TOTAL ADDIT. FEE | |

| | |
|---------------------|------------------------|
| RATE | ADDI- TIONAL FEE |
| X\$18= | |
| X80= | |
| +270= | |
| TOTAL ADDIT. FEE | |

| | |
|---------------------|------------------------|
| RATE | ADDI- TIONAL FEE |
| X\$ 9= | |
| X40= | |
| +135= | |
| TOTAL ADDIT. FEE | |

| | |
|---------------------|------------------------|
| RATE | ADDI- TIONAL FEE |
| X\$18= | |
| X80= | |
| +270= | |
| TOTAL ADDIT. FEE | |